Attorney's Docket No.: 08830-056001 Client's Ref. No.: E-131-98/0

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

PCT	PCT/US99/	17282	July 29, 1999	[X] Y	es [] No	o
Count		ation No.	Filing Date	Prio	rity Claim	ned
application(s)	of which priority is claim	ed:				
	ates of America filed by m		ect matter having a f	iling date before that	of the	
tor patent or i	inventor's certificate or an	y PCT internationa	l application(s) design	nating at least one co	untry other	than
country other	than the United States of	America listed bel	ow and have also idea	ntified below any fore	ign applica	ation
application(s)	for patent or inventor's co	ertificate or of any	PCT international ap	plication(s) designation	ng at least o	one
I her	eby claim foreign priority	benefits under Tit	le 35, United States C	Code, §119 of any fore	ign	
None						
	U.S. Serial No.	Filing	Date	Status		
of Federal Re	the duty to disclose all integrations, §1.56(a) which CT international filing date	became available	between the filing da	ntability as defined in te of the prior applica	Title 37, Contion and the	ode e
United States	application in the manner	provided by the fi	rst paragraph of Title	35, United States Co	de, §112, I	[
listed below a	and, insofar as the subject	matter of each of t	he claims of this appl	ication is not disclose	d in the pri	ior
I her	reby claim the benefit und	er Title 35, United	States Code, §120 of	any United States ap	plication(s))
00,0	.,000	July 30, 1990		i chang		
60/09	U.S. Serial No.	July 30, 1998	g Date	Status Pending		
		¥30×4	- Dod	~		
application(s)) listed below:	or Time 33, Officer	States Code, 9119(e)	(1) of any Omied Sta	les provisio	onai
I he	reby claim the benefit und	er Title 35 United	States Code \$110(a)	(1) of any United Sta		1
Title 37, Cod	le of Federal Regulations,	§1.56.		and so paronimomity in	accordance	J 17 161
I acl	knowledge the duty to disc	lose all information	n I know to be mater	ial to patentability in	accordance	e with
including the	claims, as amended by an	y amendment refe	rred to above.	1	· ·	
I he	reby state that I have revie	wed and understar	d the contents of the	above-identified spec	ification.	
	and	as amended under	PCT Article 19 on _	•		
	was described and claim	ed in PCT Internat	ional Application No	•	filed on	
	·					OII
[] [X]	is attached hereto. was filed on	as Applic	ation Serial No	and was	amended.	on
sought on the	e invention entitled <u>THYM</u>	OSIN BETA 4 PE	COMOTES WOUND	REPAIR, the specific	cation of w	s zhich:
joint inventor	r (if plural names are listed	I below) of the sub	i (if omy one name is	claimed and for which	riginai, firs	st and
I be	lieve I am the original, fire	et and sole invento	r (if anly and name is	listed below)		. 1

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Combined Declaration and Power of Attorney

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I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the

knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.				
Full Name of Inventor: Inventor's Signature:	Hynda K. Kleinman Date:			
Inventor's Signature: Residence Address: Citizenship: Post Office Address:	United States of America			
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Full Name of Inventor:	Gabriel Sosne		
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